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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorne	y Docket No.	2307O138000		
First In	ventor		HAMMOCK ET AL.	Ū
Title	DIHYDROXY DIAGNOSTIC		FATTY ACID LEVELS AS	

(1011) 101 110	THE THOMPS OF THE	3	7			·		
	APPLICATION ELEME	NTS	ADDR	ESS TO	ommissioner for Patents Application			
See MPEP o	chapter 600 concerning design patent applic	cation contents.	ADDIN		Washington	, DC 20231		
2.	Fee Transmittal Form (e.g., PTO/SB/1 Submit an original and a duplicate for fee proposed for the proposed for the proposed for the proposed form (Total Paper of the Invention Cross References to Related Applications Statement Regarding Fed sponsored R & Reference to sequence listing, a table, or	ocessing) ages 45]	 7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. ☐ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper number of pages c. ☐ Statements verifying identity of above copies 					
	a computer program listing appendix Background of the Invention		ACCOMPANYING APPLICATIONS PARTS					
- -	Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s)		9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R.§3.73(b)Statement Power of (when there is an assignee) Attorney					
-	Abstract of the Disclosure		11.	English Trans	lation Docu	ment (if applicable)		
	Prawing(s) (35 U.S.C.113) [Total S. Declaration [Total P		12. 🗌	Information Dis Statement (ID:		Copies of IDS Citations		
_	Newly executed (original or copy)	,	13. 🔲	Preliminary Ar	nendment			
b. 🗀	Copy from a prior application (37 CFf (for a continuation/divisional with Box DELETION OF INVENTOR(S) Signed statement attached deleting invennamed in the prior application, see 37 CF 1.63(d)(2) and 1.33(b).	x 18 completed) tor(s) R	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent					
6. 🔯 Ap	6. Application Data Sheet. See 37 CFR 1.76 17. Other:							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No: Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by								
reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS								
☐ Customer Number or Bar Code Label 20350 or ☐ Correspondence address below (Insert Customer No. or Attach bar code label here)								
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,								
Address								
City		State		Zip	Code			
Country	Te	elephone			Fax			
Name (Pr	int/Type) Kevin Bastian		Registration	n No. (Attorney/	Agent)	34,774		
Signature	Han Do	al D			Date	May 29, 2001		

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision. Express Mail No. EL 827 036 102 US

May 29, 2001 Filing Date First Named Inventor Hammock, Bruce Examiner Name New application Group Art Unit New application

New application

TOTAL AMOUNT OF PAYMENT (\$)

2307Q138000 Attorney Docket No.

Application Number

METHOD OF PAYMENT					FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge						3. ADD	ITIONAL	FEES				
1. indicated fees and credit any over payments to:					Large	Entity	Small	Entity				
000	a a it						Fee	Fee	Fee	Fee	Fee Description	Fee
Deposit Account 20-1430				Code	(\$)	Code	(\$)	•	Paid			
Number			105 127	130 50	205 227	65 25	Surcharge - late filing fee or oath Surcharge - late provisional filing fee					
Deposit						121	50	221	25	or cover sheet.		
Account Townsend and Townsend and Crew LLP						139	130	139	130	Non-English specification		
Name						147	2,520	147	2,520	For filing a request for reexamination		
⋈	Charge An Under 37						112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
	Applicant See 37 C		mall entity	status.			113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2.	Payme		osed:				115	110	215	55	Extension for reply within first month	
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1.	BASIC FI	ING F					118	1,390	218	090	Extension for reply within fourth month	
Large	Entity :	Small	Entity				128	1,890	228	945	Extension for reply within fifth month	
Fee	Fee	Fee	Fee	Fee Description			119	310	219	155	Notice of Appeal	
Code	,	Code	(\$)			e Paid	120	310	220	155	Filing a brief in support of an appeal	
101		201		Utility filing fee	71	0	121	270	221	135	Request for oral hearing	
106 107		206 207		Design filing fee Plant filing fee			138	1,510	138	1,510	Petition to institute a public use proceeding	
108	710	208	355	Reissue filing fee	e -		140	110	240	55	Petition to revive – unavoidable	
114	150	214	75	Provisional filing	fee		141	1,240	241	620	Petition to revive – unintentional	
							142	1,240	242	620	Utility issue fee (or reissue)	
		SI	JBTOTA	L (1)	(\$)	710	143	440	243	220	Design issue fee	
2 FYT	RA CLAIN	/ FEES					144	600	244	300	Plant issue fee	
2. LAI	MA OLAII	n 1 LLO		Extra Fe	e from	Fee	122	130	122	130	Petitions to the Commissioner	
Claims below Paid				Paid \$0	123	50	123	50	Petitions related to provisional applications			
ndepende Claims	ent 1	-3*	· = [0 X \$	80 =	\$0	126	180	126	180	Submission of Information Disclosure Stmt	
Aultiple Dependen	t		_	x	= [581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large	Entity	Small	Entit	y			146	710	246	355	Filing a submission after final rejection	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descript	ion		149	710	249	355	(37 CFR § 1.129(a)) For each additional invention to be	
103	18	203	9	Claims in exc	ess of 20		1				examined (37 CFR § 1.129(b))	<u>[]</u>
102	80	202	40	Independent of	claims in exces	ss of 3	179	710	279	355	Request for Continued Examination (RCE)	
104	270	204	135	Multiple dependent claim, if not paid								
109	80	209	40	40 ** Reissue independent claims over onginal patent 169 900					169	900	Request for expedited examination of a design application	
110 18 210 9 ** Reissue clarms in excess of 20 and Other fee (specify)												
SUBTOTAL (2) (\$)0						The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.						
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**or nur	mber previo	usiv paid.	if greater	. For Reissues, se	e above			,		o, .	(\$)	

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	Kevin Bastian	0	Registration No. (Attorney/Agent)	34,774	Telephone	415-576-0200			
Signature	An	Sas	<i>(</i>)		Date	May 29, 2001			

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